AIR CONDITIONING PERMIT APPLICATION



PERMIT#:_____

PERMIT FEE: \$150.00 flat fee

ELBERT COUNTY BUILDING DEPARTMENT PO BOX 7 - 207 COMANCHE STREET

KIOWA, CO 80117

TELEPHONE: 303-621-3172 FAX: 303-621-3177

INSPECTION LINE: 303-621-3140

Project Address:	City:	Zip:
Subdivision/Project Name:	<u> </u>	·
Contractor:	Phone:	
Mailing Address:	Fax:	
Owner Name:	Phone:	
Owner mailing address:		
City: State:	Zip:	
Contractor email address:		
Type/size and location of AC Unit:		
 Separate State Electrical Permit is required wi signed off by the state before calling the cour 		ectrical inspected and
To obtain a state electrical permit call 303-89 www.dora.state.co.us/electrical	4-2300 or go the State Ele	ectrical web site:
To schedule your STATE electrical inspection of	all 303-621-2241.	
	a 555 52 : 22 :	
I certify that I have read and understand the above:		
OFFICE USE ONLY		
<u>OTTTOE (</u>	<u> </u>	
Special Notes:		
Fees: \$150.00 flat fee.		
Approved : Month DayYear	Expires: Month Da	ayYear
Building Department Signature and Date		